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A newsletter from the Pacific
Southwest Regional Medical
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of Libraries of Medicine, Pacific
Southwest Region

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Working With Your Community -- An Interview with Judy Consales and Gary Strong

The National Library of Medicine is encouraging health sciences libraries to collaborate with public libraries in improving access to health information by the general public. To support this effort, PSRML invited Gary E. Strong, UCLA's University Librarian, to share his viewpoints regarding working with public libraries and developing community partnerships. Prior to Gary's UCLA appointment last September, he served as Library Director of the Queens Borough Public Library in New York (1994 to 2003) and as California State Librarian (1980 to 1994). Judy Consales conducted the following interview with Gary for this issue of *Latitudes*.



Judy Consales
Director, PSRML



Gary E. Strong
UCLA University Librarian

JC: Before coming to UCLA, you were Library Director at Queens Public Library, the busiest public library in the nation. Many of our health sciences libraries are beginning to work more closely with public libraries. What makes a successful partnership from the public library perspective? How can we best work with each other?

GES: I know it will sound odd, but both sides need to look at the other as a real partner. Everyone is into "partnerships" these days. I guess it looks good on the résumé or something. But there are real gains that can be made by public and health sciences/hospital libraries working closely together. At Queens, we built a very good relationship with the Queens Health Network to provide enhanced services to our common customers. We established some very important joint efforts over the three years of the partnership, and it is still alive and prospering. We found we had a lot to do together in reaching basically the same people. In addition, the public library could assist in providing literacy training (and ESOL classes) for

- [for PubMed](#)
- [HEAL Collection Expands](#)
- [The New MDRP Website: Take a Look!](#)
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hospital and clinic staff who needed to improve their skills. Most importantly, we both brought resources to the table, we were willing to work on projects which were accomplishable, and there was strong support from the top of both organizations. Programs like “Ask a Pediatrician”, asthma and TB screenings, diabetes clinics, and well baby forums were all very successful collaborations. Most of all, we believed we were important organizations to the life of the community and that by working together we could make a bigger difference than by going it alone.

JC: You reached out to many community groups at Queens. What talking points are particularly effective in working with such groups?

GES: I always started by talking about the strength of the public library and our resources. With a public library branch in every community, we could offer a focal point for gathering and for dissemination of information. Many groups were seeking membership and a place to meet. The branch libraries were critical spots for this to happen. I would stress that we had talented and professional staff to assist groups in developing programs, building reading lists, and providing access to the Internet. We became a resource for many immigrant-serving agencies because many immigrants, in particular, came to the public library as soon as they arrived in the US. Working together we could accomplish much more than working alone.

JC: As California State Librarian and as Library Director at Queens, you have experienced difficult budget times, as our state and local governments are now facing. What advice can you give based on your past experience?

GES: Never assume it will be the same again. It certainly has not been after Proposition 13. The economic downturn in New York City is resulting in much the same impact. And now, our current budget situation in California calls for new resolve to fight for the basics of each library and its service responsibility to the community. We have much to contribute toward the health and welfare of those who live in our communities and we need to speak out forcefully to be heard.

JC: The medical community is becoming more and more concerned about the impact of low literacy levels on patient health care follow-through. What role should we libraries play in promoting health literacy?

GES: As I mentioned, the Queens Health Network and the Queens Library’s literacy program worked together to make sure that hospital staff who needed help were enrolled in the appropriate classes to give them new literacy skills to improve the workforce providing services. We were careful to include health, nutrition, and child development sections in all of

our children's and toddler programs, calling on specialists to assist the Children's Librarians in providing the programs.

In California the California Literacy Campaign and the Families for Literacy Program are great resources for partnership in developing appropriate health literacy modules for inclusion in the curricula that is used in these programs. At Queens we added a number of such components in our after school programs reaching the children directly and parents indirectly.

JC: What do you think will be the most important trends to affect libraries of all kinds in the next three years?

GES: Money, money, and money! That aside, I believe our greatest challenge is to articulate our place and importance in the game, whether in the community, on the campus, or in the health sciences center. So many people believe that information will magically appear on their desktop. We must continue to inform our users of our role in bringing it there and take credit when we do it well. Second, we need agile, dedicated staff who can adjust and change with the times, and third, we must focus on customer-centered services which are relevant to those we serve.

JC: What is the most important quality for the 21st century library to have in today's environment?

GES: A sense of place and an assured sense of what we are and what role we play in our respective communities.

JC: Gary, thank you for your insight! I think an important starting point for health sciences libraries is to build our advocacy toolbox. We need to understand our communities and to know the key players, both inside and outside of the institutions we serve directly. We need to articulate our roles and our resources to these potential partners and to use our contacts within the healthcare fields. As librarians we all share similar values; we can build on this through collaboration. I am really interested in feedback about these issues from our network members! Please send me your ideas at consales@library.ucla.edu.

This article is freely available at: <http://nnlm.gov/psr/lat/v13n2/community.html>

Stake Your Claim to Health Literacy What happened and what's next

By Natalie Kamper, M.L.I.S.
2nd year NLM Associate Fellow

On January 28, the Pacific Southwest Regional Medical Library hosted “Stake Your Claim to Health Literacy.” This one-day educational symposium focused on the practical knowledge and tools needed to participate in Health Literacy initiatives within the healthcare and health information arena. The event was co-sponsored by the NCNMLG, MLGSCA, and PNC chapters of the Medical Library Association and preceded their joint meeting in Sacramento, California. The symposium was developed by an advisory group of library and literacy professionals from the NN/LM Pacific Northwest and Pacific Southwest Regions. “Stake Your Claim to Health Literacy” drew over 100 participants and included medical librarians, public librarians, healthcare interpreters, and health educators.

What happened?

The symposium covered topics concerning language and cultural access to health information as well as research and actions taken by major contributors to Health Literacy initiatives. Neil Rambo opened the morning session representing MLA and shared the activities of their Health Information Literacy Taskforce, which include defining the librarian role in Health Literacy, developing a communication/advocacy kit, and promoting partnerships with other organizations involved in Health Literacy initiatives. More information about the Taskforce and their activities can be found at <http://www.mlanet.org/resources/healthlit/index.html>. Joyce Backus from the National Library of Medicine discussed NLM's efforts to identify and make available Easy-to-Read health information pages on MedlinePlus and NIH Senior Health Web sites. MedlinePlus now offers interactive tutorials in English and Spanish in addition to the low literacy written materials. More information about these sites can be found at medlineplus.gov.

Dean Schillinger, M.D., served as keynote speaker for the symposium. He is an Associate Professor of medicine at the University of California, San Francisco, and heavily involved in research on clear health communication. Dean presented results of investigations performed at UCSF dealing with patient-provider communication and medical students. Despite efforts to improve communication and reduce the use of medical jargon, his research suggests a persisting gap in the effectiveness of communication between physicians and their patients.

The symposium offered breakout sessions to deliver practical knowledge and tools in Health Literacy. Audrey Riffenburgh covered formulas for assessing the readability of health information. Beth Wescott spoke about laws, regulations, and cost ramifications concerning low health literacy, particularly relating to informed consent. Christine Owen Wilson addressed cultural considerations with translated health information. Sabrina Kurtz-Rossi covered non-print resources available to low literate adults. The symposium also featured exhibitors that shared resources from their organizations. The exhibitors represented [California Healthcare Foundation](#), [California Healthcare Interpreters Association](#), [California Literacy](#), [EPA Associates](#), [Institute for Healthcare Advancement](#), and [Kaiser Permanente](#).

What's next?

You can learn more about health literacy and join initiatives in your organization or within MLA. The following list of activities points to Web sites that offer information about clear health communication, partnerships in health literacy, and providing materials for low literacy patients. Here are a few suggestions of ways to get involved in Health Literacy:

1. Take a look at the [MLA Health Information Literacy](#) Web site and participate in HIL activities.
2. Spotlight links on your Web site that point to [MedlinePlus](#) Easy-to-Read pages and [NIH Senior Health](#).
3. Read about [Pfizer Clear Health Communication](#).
4. Apply for an [AMA Foundation Health Literacy Kit](#) and share it with colleagues and other healthcare professionals.
5. Download materials from the [Ask Me 3](#) project.
6. Learn about the [California Health Literacy Initiative](#) and use their links for resources.
7. Attend the Third Annual Health Literacy Conference in May 2004, sponsored by the [Institute for Healthcare Advancement](#). Register by April 16, 2004, for “earlybird” prices!

This article is freely available at: http://nnlm.gov/psr/lat/v13n2/health_literacy.html

Pat Wagner on Listening: A Network Member Reports from the Joint Meeting

By Laura Brown, M.L.S.
Associate Director
Jesse Medical Library & Information Center
Loma Linda University Medical Center

One of the highlights of the Joint Meeting of Medical Library Groups in Sacramento in January was Pat Wagner's keynote address titled “Listening as a Diagnostic Tool for Medical Librarians”. I found her presentation exceptionally helpful and want to share my notes with colleagues who were not able to attend the meeting.

Pat began her talk with a story about the German religious scholar Martin Buber (1878—1965). During World War I, a student came to Buber with an important question. Buber was a brilliant man, and he talked for hours while the young man listened attentively. A few months later the young man was killed in the war. The student's friends asked Buber how he answered the young man's question, “Is it moral to be in the war?” But Buber did not remember that the student had asked the question. Then the realization hit! Buber was horrified; he had been so busy being the brilliant Martin Buber that he hadn't stopped to listen to the question that was troubling the young student in the first place. Now it was too late.

So often those of us who are gifted talkers do not spend enough time listening, except to hear that slight pause that will allow us to make our next wise comment. Pat's presentation provided some useful tools to help build listening skills.

Tips:

1. Create a room in your mind where the only other thing present in the room is the person you are listening to. Let *them* fill the room.
2. Act and provide feedback. If the answer is *no*, tell them why. Don't keep secrets you don't need to keep.
3. Find ways to say yes, or at least leave the door open (not "we can't do it", but "we will have to investigate and see if it fits in with the strategic plan").
4. Remember the goal is not to prove you are the smartest person in the room. The goal is to get things right. Others often have valid contributions to make to that goal; use every brain cell in the room.
5. The mantra: Tell me more. --- Tell me more. --- Tell me more.
6. On committees or in meetings when it is your time to talk, look at the rest of the committee members. If there are some that have been quiet, solicit their input instead of giving yours.

Exercise:

Try sitting in silence with another person and just listen. If you were allowed to ask questions, you would be leading the conversation. Pretend the other person is a flame, and if you speak, you will blow it out. In her regular classes, Pat had people do this for 15 minutes – very hard for those of us who are used to monopolizing the conversation. This exercise allows the talker full control over the conversation.

Suggested Readings:

1. *I and Thou* by Martin Buber
2. *Philosophy and the Real World: An Introduction to Karl Popper* by Bryan Magee

Pat Wagner also taught a CE course, "Marketing As If Your Library Depended On It", which got rave reviews. It will be repeated at MLA this May.

[Editor's Note: Pat Wagner has worked with [Pattern Research](#) and its predecessor the Office for Open Network since 1977 as a consultant, researcher, writer and trainer. She frequently leads workshops and teaches courses in a variety of library settings.]

This article is freely available at: <http://nml.gov/psr/lat/v13n2/listening.html>

You had to be there!

Q ‘n A’s from the 2004 Joint Meeting “RML Update” Game Show

On January 30th at the Joint Meeting of NCNMLG, MLGSCA, and PNC/MLA, two regional offices of the National Network of Libraries of Medicine (PSR and PNR) presented the “RML Update” (see the [“What’s New at NN/LM”](#) handout from the “RML Update”). After the initial presentation by Heidi Sandstrom and Neil Rambo, the RMLs hosted a game show with questions on PubMed, MedlinePlus, DOCLINE, Gateway, ToxTown, Household Products Database, and other NLM systems. The game show was an amalgamation of *The Price is Right*, *Jeopardy!*, and any other famous game show that pops into your head.

The main objectives of the game show were to entertain and, most importantly, to educate our Network members. Three teams of 3 contestants each represented the chapters. Each of the contestants were given horns to blow when their team had an answer, and people sure used those horns! Scorekeepers also represented the three MLGs. The game show hosts, Kay Deeney (PSR), Maryanne Blake (PNR), Gail Kouame (PNR), and Andrea Lynch (PSR) took turns asking the questions that were delivered by Alan Carr (PSR) and Linda Milgrom (PNR) dressed up as PricewaterhouseCoopers representatives. M.C. Kay Deeney acted as the “whistleblower” when contestants got too rowdy. You had to be there!

If you would like to see the questions and the “real” answers from the game show, visit: http://nnlm.gov/psr/pres/jtmtg2004_gameshow.html. Test yourself, your colleagues, and others! Use these questions to educate your library’s patrons! Use the idea of doing a game show for your own library’s events and presentations! If you end up using any of these questions or the idea of a doing a game show at your next library event, let us know.

Andrea Lynch and Kay Deeney

This article is freely available at: http://nnlm.gov/psr/lat/v13n2/q_n_a.html

Report of the RML Directors’ Mid-Year Meeting

Judy Consales and Heidi Sandstrom joined Regional Medical Library (RML) directors and associate directors from the seven other National Network of Libraries of Medicine (NN/LM) regions for the third RML Directors’ Mid-Year Meeting on December 4-5, 2003. It was held in Houston, Texas, and was hosted by the Houston Academy of Medicine-Texas Medical Center (HAM-TMC) Library. Betsy Humphreys, Deputy Director for Library Operations, and Angela Ruffin, Head, National Network Office, also attended along with other librarians from the National Network Office, the Outreach Evaluation Resource Center, and the National Online Mapping Center. The agenda for the two-day meeting was a full one and included the discussion of RML outreach evaluation initiatives, a presentation on the Partners in Information Access for

the Public Health Workforce collaboration, an NLM update, resource sharing discussion, reports of past and planned outreach activities, and presentations on special initiatives at HAM-TMC Library. Some of the highlights of the meeting follow:

NN/LM Outreach Evaluation Initiatives

Two populations have been selected by NN/LM Regional Medical Libraries for expanded outreach efforts: public libraries and the public health workforce. A logic model for each of these populations was adopted, in June 2003, as a tool to measure the effectiveness of outreach activities during the current contract period. (See the article, "[Outreach Priorities: Public Libraries and Public Health Agencies](#)", in the September/October 2003 issue of *Latitudes*). Some of the resources being developed to support these outreach evaluation initiatives were discussed at the Houston meeting. These include a curriculum for training public librarians about consumer health information, a resource for public librarians to use to identify and work with community health partners, and a curriculum for training public health professionals. These resources should be available to our Network Members by this summer to use in their outreach efforts.

Partners in Information Access for the Public Health Workforce

A strategic planning session of the Partners project committee was held in October 2003 and reported on at the Houston meeting. Six-month and 3-year goals and objectives were developed. Three-year goals for Partners are:

- Increase the visibility of the Partnership with librarians and the public health workforce.
- Identify and develop collaborative projects to meet the information needs of the public health workforce.
- Strengthen the collaboration among the Partners.
- Increase the information literacy of the public health workforce.
- Organize and deliver public health resources so they are easier to find and use.

NLM Update

Betsy Humphreys, NLM's Associate Director of Library Operations, discussed NLM's growing role as a center for the distribution of clinical vocabularies. She also mentioned NLM's new emphasis on expert searching and NLM's Senior Fellowship for Informationist Training. This Fellowship provides support for experienced librarians, scientists, health professionals and others who wish to become informationists, defined as "information specialists who have received graduate training and practical experience that provides them with disciplinary background both in medical or biological sciences and in information sciences/informatics." More information about this Fellowship can be found at <http://www.nlm.nih.gov/ep/GrantInformationistF38.html>.

Ms. Humphreys' talk was followed by a review of the national maximum currently being charged by Resource Libraries for DOCLINE requests, including background on how this charge is determined and its relationship to fair use; some key findings; and a discussion of "next steps"

in addressing requests for changes to the current maximum charge. PSRML will keep you posted on the status of this issue.

Resource Sharing

The Houston mid-year meeting concluded with a discussion of resource sharing, specifically the impact current licensing arrangements have on the ability of libraries to provide cost-effective interlibrary loan service to a broad range of users. NLM is working with the Regional Medical Libraries to identify possible actions that might improve access to these resources.

Heidi Sandstrom

This article is freely available at: http://nnlm.gov/psr/lat/v13n2/rml_update.html

Perspectives on the Internet Librarian Conference 2003 *Our shifted roles*

By Ana Macias, M.L.I.S.
Medical Library Technician
Weed U.S. Army Community Hospital

[Editor's Note: Ana Macias attended Internet Librarian 2003 with support from a PSRML Professional Development Award. Shortly thereafter, in December 2003, she received her MLIS degree from San Jose State University specializing in health sciences libraries. She did her practica with Marilyn Schwartz and Jan Dempsey at the Thompson Library, Naval Medical Center, San Diego and with Laura Brown at the Jesse Library, Loma Linda University. We wish to congratulate Ana on her graduation!]

The role of librarians has changed over the years, but just how much was clearly evident at the Internet Librarian Conference, held in Monterey, CA. My initial apprehension in attending the conference, fearing it would be too technical, was overcome after attending my first session, *Blogging 101*. The concept was vaguely familiar to me, and I had not realized how this application not only applies to medical libraries, but that the easiness of establishing a blog, as demonstrated by the facilitators, is amazing. Medical librarians have so little time that making use of any available tools, which enhance their productivity and enable them to keep current, are always welcomed. The course showed users how to consolidate all pertinent updates into one site, rather than jumping from web site to web site. Of particular interest was the idea of tailoring blogs to specialties. For example, you could create an internal medicine blog that includes updates from different web sites and make these blogs accessible to the staff through the hospital's intranet. Through this blog, they'd be reading the most current information within that day, as opposed to several sites and several days.

Opening sessions ranged in topic, and I found them all to be very relevant to the profession. Whether it was XML, HTML, or RSS feeds, all presenters addressed the changes taking place within the information world and how these changes will affect current practice as well as future areas for the profession. Teaching information literacy has now become the focus of many in the profession. Consumers more often than not use *Google* solely to access health care information, and the results are - well... we know what they are.

The Health track portion sponsored by MLA, *Cool Tools for Health*, was an excellent presentation. The health information needs of consumers were addressed, as was the importance of teaching and referring consumers to quality health sites on the Internet. Their search skills and information competency levels are all factors that affect access to the type and quality of information they find. Only by analyzing consumer search patterns and method of thinking will professionals be better able to serve them. Analyzing how consumers search for health information establishes trends, which can be used to enhance existing web sites, to analyze information layout or architecture, and to focus on the needs of the user.

The track on eLearning was also interesting. It addressed the pros and cons of establishing a distance education (DE) program whether it is for curriculum or continuing professional education (CPE). DE is among the preferred methods of teaching across campuses today, but implementation has not come without complications. The need for continuously assessing what is learned is key to establishing a good DE program. This data is then used to make improvements and allows the facilities to continuously alter both the content and mode of presentation.

The conference has given me both new directions in where technology and information needs tie in to the profession, what changes are coming, how they will affect not only the information professional but the user as well. The sites from the MLA sponsored track will be implemented in my library's consumer health page. I hope that these changes will facilitate consumers' search for quality health information.

Thank you PSRML for giving me the opportunity to attend this conference!

[Editor's Note: For more information about these awards and for a copy of the application form, go to PSRML web at [Professional Development Award](http://www.professionaldevelopmentaward.org).]

This article is freely available at: <http://nnlm.gov/psr/lat/v13n2/perspectives.html>

MLA Teleconference Roles and Essential Skills for the Expert Searcher

“One day when I was working at the Epilepsy Foundation, a parent of a high school student called the library. The family had been told that the student, who was heading to college on a football scholarship, had epilepsy. If this diagnosis were true, he wouldn't be able to play football, would lose his

scholarship, and for financial reasons not be able to attend college. I interviewed the family for more information and conducted a PubMed search. I found articles on Kleine-Levin Syndrome, a self-limiting disease that typically disappears by early adulthood. Armed with new information, the family sought another opinion. The student in fact had Kleine-Levin Syndrome; he was able to play football, keep the scholarship, and go to college. I got a thank you letter signed by him and his parents.”

Russell Smith, M.L.S.
Expert Searcher

What would you have done if you had gotten this request? Are you an expert searcher? Would you like to find out more about expert searching? The Medical Library Association is offering a teleconference, “Roles and Essential Skills for the Expert Searcher”, on Wednesday, March 10, 2004. The teleconference will take place from 11:00 am to 1:00 pm Pacific Time; most sites will have wrap-around sessions before and after the teleconference. PSRML is sponsoring a number of sites in the Pacific Southwest Region; a list of sites is included at the end of this article.

The goals of this teleconference are to give attendees an overview of the basic concepts of expert searching, to explore the issues involved in developing and retaining expert skills, and to promote expert search services as an important means of institutional support. Additionally, the teleconference serves as an introduction to the MLA Policy Statement: [Role of Expert Searching in Health Sciences Libraries](#). The teleconference speakers recommend reading this policy statement before the March 10 event.

At the end of this teleconference, attendees will be able to:

- Define the concepts of expert searching and expert searchers
- Identify and describe the various components of the expert search process
- Identify and describe situations in which the knowledge and skills of expert searchers are essential
- Cite "high impact areas" in which consultation with an expert searcher and the provision of an expert search are critical to institutional decision-making
- Explore avenues by which health information professionals/health sciences librarians may become and remain expert searchers

Participants will receive 2.0 MLA Continuing Education contact hours for the teleconference alone or 3.5 contact hours if wrap-around sessions are included.

PSRML will circulate a VHS copy of the proceedings following the teleconference. If you are unable to attend the conference, you can request a loan from PSRML’s web site at [Videocassettes, CD-ROMs, DVDs and Literature Available for Loan](#) page.

More information about the teleconference and about expert searching is available on the [MLA Expert Searching page](#).

Teleconference Sites in the Pacific Southwest Region

Arizona - Maricopa County

Maricopa Integrated Health System
Room Location: Administration Building, Auditorium 1
2601 E Roosevelt Street
Phoenix, AZ 85008
<http://www.maricopa.gov/medcenter/>

Parking: Free
Maximum People: 25
Site Coordinator Name: Rebecca Birr
Phone: 602-344-5197
Email: rebecca.birr@hcs.maricopa.gov

Arizona - Pima County

University of Arizona
Arizona Health Sciences Library
Room Location: 2102
1501 N Campbell Ave
Tucson, AZ 85724
Online Registration: <http://www.ahsl.arizona.edu/classes/AHSL-classes.cfm>

Parking: \$3.00-9.00
Maximum People: 125
Site Coordinator: Mikel Bates
Phone: 520-626-8087
Email: batesm@ahsl.arizona.edu

California - Alameda County

Kaiser Permanente
Care Management Institute
Room Location: 16th Floor, B
1 Kaiser Plaza
Oakland, CA 94612
<http://www.kpcmi.org>

Parking: \$6.00-15.00
Maximum People: 30
Site Coordinator: Sara Pimentel
Phone: 510-271-2360

Email: sara.pimental@kp.org

California - Los Angeles County

USC Health Sciences Campus
Norris Medical Library
Room Location: Conference Room
2003 Zonal Avenue
Los Angeles, CA 90089
<http://www.usc.edu/nml>

Parking: \$6.00
Luncheon: \$10.00 (optional)
Maximum People: 40
Site Coordinator: Christina Mayberry
Phone: 323-442-1972
Email: christina.mayberry@usc.edu

Kaiser Permanente Medical Center, Bellflower (sponsored by MLGSCA)
Room Location: Tall Hospital Tower, Large Conference Rooms: BH01, BH02
9400 East Rosecrans Avenue
Bellflower, CA 90706

Parking: Free
Lunch: \$6.00 (optional)
Site Coordinator: Pam Lee
Phone: 562-461-4938
Email: Pam.X.Lee@kp.org

California - San Bernardino County

Loma Linda University
Del E. Webb Memorial Library-Faculty Reading Room
11072 Anderson Street
Loma Linda, CA 92350-0001
<http://www.llu.edu/llu/index.html>

Parking: Free
Luncheon Cost: \$10.00 (optional)
Maximum People: 25
Site Coordinator: Laura Brown
Email: ldbrown@llu.edu
Phone: 909-558-4550

California - San Diego County

University of California, San Diego
Biomedical/Medical Center Libraries
Room Location: North Conference Room/Old Student Center
9500 Gilman Drive
La Jolla, CA 92093-0175
<http://gort.ucsd.edu/clinlib>

Parking: \$6.00 (campus)
Maximum People: 40
Site Coordinator: Craig Haynes
Email: craig@library.ucsd.edu
Phone: 619-543-6520

California - Santa Clara County

Stanford University Medical School
Lane Medical Library
300 Pasteur Drive
Room L - 109
Stanford, CA 94305-5123
<http://lane.stanford.edu/index.html>

Parking: \$3.00-12.00
Site Coordinator: Pam Murnane
Phone: 650-723-5971
Email: pam.murnane@stanford.edu

Hawaii

Hawaii Medical Library
Room Location: Queen's Conference Center - 2nd floor
1221 Punchbowl Street
Honolulu, HI 96813
<http://hml.org/hpcmla/events.html>

Parking: \$3.00
Maximum People: 40
Event Coordinator: Alice Witkowski
Phone: 808-536-9302 ext 103
Email: witkowski@hml.org

Julie Kwan, Andrea Lynch, Karen Ricard

This article is freely available at: http://nnlm.gov/psr/lat/v13n2/mla_expert.html

Update on Scanners for Electronic Document Delivery

By Sylvia Merino, M.B.A., M.P.H.
Head, Learning Resources Division
UCLA Louise M. Darling Biomedical Library

*[Editor's Note: This article updates two previous articles by Sylvia Merino: [The Quick Guide to Electronic Document Delivery: From Paper to PDF](#), published in *Latitudes*, May/June 2002 and [Electronic Document Delivery: Technology Update](#), published in *Latitudes*, March/April 2003.]*

As with most things in the electronic world, the price of scanners has gone down while quality and features have gone up. With a wider choice of scanners within your price range, what are the features to consider in a scanner suitable for library work?

Don't settle for the slower type of scanner connections, such as parallel or even standard USB. Go for a "hi-speed USB 2.0" scanner. FireWire (also known as IEEE 1394) and SCSI are also fast connection types, but most computers do not come with FireWire or SCSI ports and you must go through extra effort to install them yourself, whereas one or more USB ports are always included on a modern PC. Compared to just a year ago, there are many more USB 2.0 scanners to choose from, and you can find at least one from each of the major scanner manufacturers. USB 2.0 is backwards compatible with USB 1.0 so a hi-speed scanner can be used even on a computer that has only a standard USB 1.0 port, although it won't operate at hi-speed. Just make sure that your computer has a functional USB port; in other words, that it has the physical port AND that the operating system of your computer is one that supports USB. Generally, this means that your computer should have any Windows operating system except 95 or NT. Some computers with the 98 operating system may have USB problems, although the more up-to-date 98SE usually seems to work okay with USB devices. Always check the list of operating systems which are supported by the scanner you want to purchase. If you have a technical support department at your organization I highly recommend you ask them for help determining if a particular scanner make and model will be compatible with your workplace computer. Be particularly careful if you have a new computer with the XP operating system; I found that my barely 2-year old HP scanner which I wanted to move from one computer to my new work computer did NOT have updated drivers to allow guaranteed compatibility with my new XP machine. It may be that, with lower prices for scanners, manufacturers will not be motivated to put in the extra time and expense to update drivers so that their older scanner models achieve compatibility with newer operating systems.

Once a very expensive option, it is now possible to get a scanner bundled with an automatic document feeder (ADF) for less than \$200 -- a price that won't break the bank. This can be an important accessory if you are scanning loose papers as it will save you the time of laboriously placing each sheet of paper on the bed of the scanner. Note, however, that the bulky ADF does nothing at all for you if you are mainly scanning pages from books or journals. In fact, the bulkier lid may get in the way and it also adds one more complicated part to the scanner that may fail. However, if you do want the convenience of the ADF, one scanner maker to check out with some of the lowest priced scanner/ADF bundles is Microtek. I recently purchased one for

scanning bills at home and I went with Microtek rather than my old standby, HP, because of the low cost ADF bundle. I was impressed by the user-friendly Microtek ScanWizard which made it easy to operate the ADF and to get very good PDFs without resorting to the manual to look up any scanner technical jargon. I found the basic Microtek ScanWizard interface much easier to understand than the HP PrecisionScan.

Third-party software bundles sold with scanners have also gotten better and it is possible to purchase a scanner that comes with PDF-capable software included. In other words, you could avoid the purchase of separate Adobe Acrobat software if you choose your scanner with careful attention to the software that comes bundled with the scanner. I was pleasantly surprised to find that my new scanner came with two different products that provided me with basic PDF-making ability: Adobe Photoshop Album and Adobe PhotoDeluxe. The PhotoDeluxe product has been discontinued, but Photoshop Elements is Adobe's new mid-level product for image editing. It has the same basic PDF-making capabilities as PhotoDeluxe. You can still purchase the full-blown Adobe Acrobat if you want all the bells and whistles it provides, such as the ability to build a search index for your PDF and to create bookmarks and links, etc. But if all you want to do is scan a journal article into a plain vanilla PDF suitable for an email attachment, almost any of the recent versions of Adobe imaging products will serve you well enough.

Lastly, a frequent question asked by those shopping for a new scanner is the meaning of specifications such as 2400 x 4800. The lower number of the two represents the actual optical (hardware) capability of the scanner and is more important than the larger (software) number. Personally, with scanner prices as low as they are, I wouldn't settle for anything less than a scanner with 2400 optical resolution which will allow for very decent document and image scanning. I could launch into a more detailed explanation here but I would prefer to guide you to a really helpful web site devoted to teaching the basics on understanding how scanners operate. Written by Wayne Fulton, his "Scanning Basics 101" site covers almost everything you might want to know regarding scanners. Another reason to visit his web site is that you'll find some of the lowest prices on ScanSoft OCR software I have seen on the web: <http://www.scantips.com>.

Besides ScanSoft, note that the other major OCR software product is the Abbyy FineReader. Depending on exactly what features you need from your OCR software it's a toss-up as to which will serve you better, OmniPage Pro or Abbyy FineReader. Both programs are capable of giving you over 98% accuracy, a vast improvement over the days when you were lucky to get 65% accuracy and had to spend way too much time fixing errors in a scanned document. Why would you need OCR software? It probably isn't necessary to use OCR when scanning journal articles to PDF since all you need for a good readable PDF is the "image" format. But what if you had a report that was handed out at a conference and wanted to quote lengthy passages from it in a newsletter or email to a group of co-workers? You could save yourself the time of re-typing the passages by scanning and OCR'ing the text to capture the characters of the original paper report.

While you peruse the "Scanning Basics 101" site, check out the articles on the PaperPort software by ScanSoft. If you want to try to organize your stacks of papers at work and go the route of the "paperless office", then you'll be glad to know that PaperPort is now using PDF rather than the proprietary PaperPort format that was formerly used. This is the one thing that prevented me from going with the PaperPort product in the past, but I just might have to take a

closer look at them again. Naturally, I would prefer to use PDF rather than a proprietary format to avoid worries about future compatibility issues for my archived work documents. I trust that PDF is going to be the preferred format for document sharing for quite some time before we have to worry about up-converting to another future format.

This article is freely available at: <http://nnlm.gov/psr/lat/v13n2/scanners.html>

Test the New Version of BioMail! A Current Awareness Alternative for PubMed

What is BioMail?

BioMail, located at <http://biomail.org>, provides an alternative to “Cubby” by regularly performing user-customized search updates for recent scientific papers in the PubMed database. Registration and use of BioMail is freely available throughout the world. The BioMail program automatically alerts users to new papers in a particular field of interest, and sends a list of retrieved articles to a user’s email account. The updated retrieval comes in HTML format, which allows users to view abstracts for selected references. References may also be viewed in MEDLINE format, and then exported into a reference manager program, such as EndNote.

Why is BioMail helpful?

With BioMail, there is no need to remember when it’s time to run search updates. All stored searches in BioMail may be accessed, edited, or deleted at any time. Other advantages of BioMail include its easy-to-use intuitive interface, and the ability to test a search strategy to see how much retrieval will be obtained. Searches in BioMail are executed exactly like a direct PubMed search.

What is happening with BioMail?

After a year of development funded by the National Library of Medicine, a new version of BioMail is nearly ready for release. The new version of BioMail will become available in the near future, and will include an updated look and enhanced functionality. A trial site featuring the new look of BioMail is available for testing at <http://new.biomail.org>, and the developers of BioMail are very interested in your input. It’s very easy (and free) to register for an account, try the different features, and send feedback or reports of bugs by clicking on the “Contact Administrator” link. Any reports of problems should include mention of the operating system, as well as browser name and version number used.

Major changes to the system include a total redesign of the user interface, to be more clean and attractive. BioMail has always allowed users to designate a frequency for delivery of updates ranging from twice per week to monthly, but the new system adds the capability to specify a particular day of the month when updates should be executed. The revised system also provides support for the Nucleotide database, in addition to PubMed.

<http://new.biomail.org> is a temporary site, and any stored searches will disappear when the system is upgraded and the enhancements are incorporated into the main BioMail site, <http://biomail.org>. The revised version of BioMail will continue to be a free service, relying on Open Source code. Please consider giving BioMail a trial run! Let us know what you think about it!

Alan Carr

[Editor's Note: You can test run a search in PubMed, click on Details, and copy your search strategy. Then paste this into the BioMail search box.

When you get your BioMail results, you will need to open your Cubby first in order to activate your LinkOut icons. Then when you click on the individual records from the BioMail message, you will see the icons for the LinkOut providers that you have saved in your Cubby.]

This article is freely available at: <http://nnlm.gov/psr/lat/v13n2/biomail.html>

HEAL Collection Expands

By Shona Dippie
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The Health Education Assets Library (HEAL) collection grows to over 3200 items with the addition of hundreds of videos, interactive tutorials, animations, and other curricular resources including:

- Videos from the award-winning NeuroLogic Exam: An Anatomical Approach Web site created by Paul D. Larsen, M.D. and Suzanne S. Stensaas, Ph.D. are now available through HEAL.
- The well-known MedlinePlus Interactive Health Tutorials from the National Library of Medicine, designed and developed by the Patient Education Institute, recently became part of the federated HEAL collection.

- A number of animations created by the Knowledge Weavers (KW) project were also added to the HEAL collection. The animations include the renowned HyperHeart, which developed from collaboration between Donald K. Blumenthal, Ph.D. and the KW team; Derivation of the ElectroCardioGram; and Voluntary Control of the Facial Muscles among others.
- HEAL now also offers the original “They’re Rich, You’re Dead” anti-smoking program by Arthur E. Pitchenik, M.D. of the University of Miami Medical School.

HEAL’s vision is to create the leading digital library relied upon by a worldwide community of teachers and learners to improve the effectiveness of health sciences education. HEAL’s mission is to provide free digital materials of the highest quality that meet the needs of today’s health sciences educators and learners. HEAL promotes the preservation and exchange of useful educational assets while respecting ownership and privacy. We welcome additional partners to the HEAL community. The value of the HEAL digital library grows with each new resource that joins the HEAL “federation.”

HEAL is a multi-institutional, collaborative project funded by the National Science Foundation’s National Science Digital Library initiative and the National Library of Medicine. Sharon Dennis, M.S., from the Spencer S. Eccles Health Sciences Library at the University of Utah; Sebastian Uijtdehaage, Ph.D., from the David Geffen School of Medicine at UCLA; and Chris Candler, M.D., from the University of Oklahoma College of Medicine are the co-directors of the project.

More information about the HEAL Project, as well as free access to the multimedia collections, is available at <http://www.healcentral.org>. We look forward to your feedback as we continue to improve this resource.

This article is freely available at: <http://nnlm.gov/psr/lat/v13n2/heal.html>

The New MDRP Website: Take a Look!

We have just launched the website for PSRML’s Medical Digital Reference Project at <http://nnlm.gov/psr/mdrp/>. The pages feature:

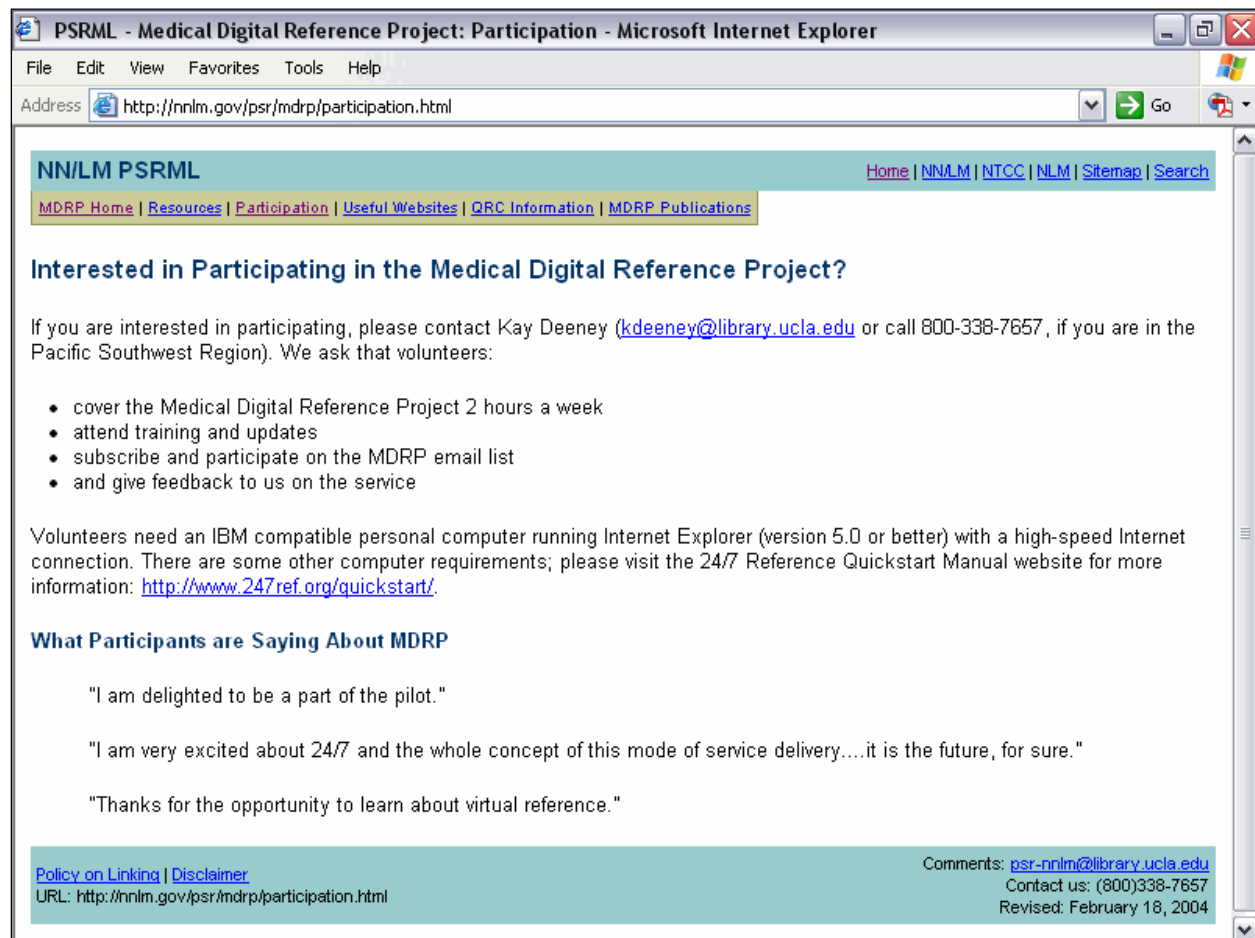
- background on and the history of the Project
- resources and website for the MDRP participating librarians
- opportunities for follow-up through the Question Referral Center (QRC), an email follow-up question utility



Training in San Francisco, CA

- information on participating in the Project and responsibilities
- and publications about the Project that go back to 2001

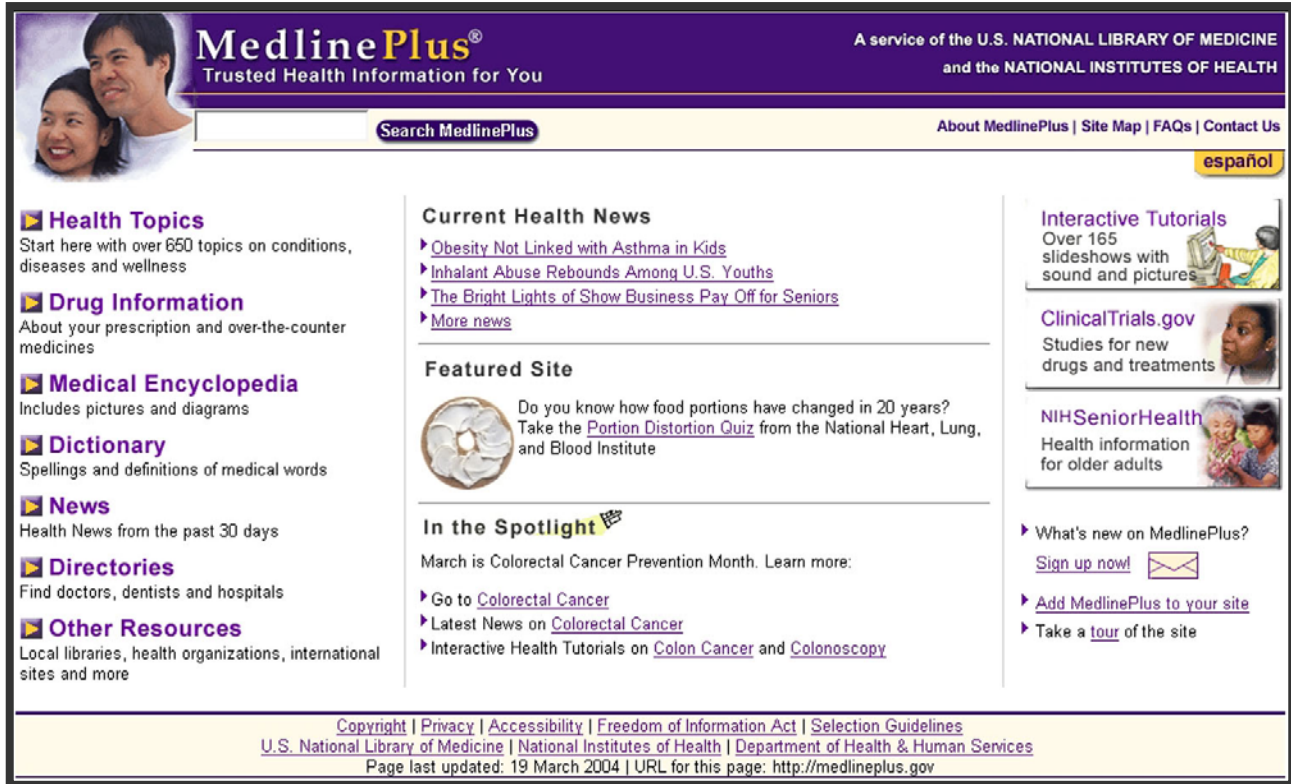
This website has resources for everyone, whether you already participate, are contemplating participating, or just interested in knowing what other medical librarians are doing.



Kay Deeney and Andrea Lynch

This article is freely available at: <http://nnlm.gov/psr/lat/v13n2/mdrp.html>

MEDLINEplus changes to MedlinePlus – and has a new tagline as well



Did you notice? NLM is capitalizing MedlinePlus in a new way. The MedlinePlus web site has been changed to show the new usage. The name has also been changed on the NLM web site and the PSRML web site. The following description was distributed by Naomi Miller, MedlinePlus Content Manager to announce the change that took place on February 18, 2004.

“...In the new design, MedlinePlus appears in upper/lower case lettering, replacing "MEDLINEplus" throughout the site. This capitalization format better reflects common use of the site name. Also, you can link to the home pages of the National Library of Medicine and the National Institutes of Health from the text in the banner on every MedlinePlus page. Most notable will be the relocation of the "Home" tab on each secondary page beside the other navigational tabs. Also, the "printer-friendly version" and "e-mail to friend" icons are colored more brightly to draw users' attention to these handy features.

MedlinePlus en español also reflects these improvements and clarifies some text links. "Sobre" is now "Sobre MedlinePlus." "Mapa de Contenido" is now "Índice." The toggles between English and Spanish are more prominently located as tabs on the right hand side of the banner on each page.

Please note the new taglines appearing on each page, "Trusted Health Information for You" in English and "Información de Salud para Usted" in Spanish.

We know these changes will affect your promotional and educational materials and apologize for the inconvenience. We're making these changes based on your feedback and usability studies to continue improving MedlinePlus."

Julie Kwan

This article is freely available at: <http://nnlm.gov/psr/lat/v13n2/medlineplus.html>

Frequently Asked Questions @ PSRML

Below are some questions (with the answers) that have come into the PSRML office since the last issue of *Latitudes*. Take a look!

- How do you install the barcode font in order for barcodes to display on DOCLINE and Loansome Doc requests?
- Now that I have LinkOut set up, what else do I do?
- Why are requests routing to a library that is not in my routing table?
- DOCLINE won't let me look at certain requests. Why is this happening?
- Is it possible to see Tugger outside of the DOCLINE system?

Question: How do you install the barcode font in order for barcodes to display on DOCLINE and Loansome Doc requests?

Answer

There is a DOCLINE Help topic on installing the barcode font to display on requests. Be sure you install the barcode font on all computers that access the DOCLINE system. I have reprinted the contents of it here:

"DOCLINE provides a machine-readable version of the request number to facilitate volume processing. To display and print barcode numbers, you must have the 3 of 9 Barcode font installed in the Windows Fonts directory of your PC.

Once the barcode font is installed, barcode numbers will automatically display and print on DOCLINE requests.

NOTE: Displaying barcode numbers is optional. Without the barcode font installed, the request number displays as:

4191 *

Request # 4191

To download the 3 of 9 Barcode font, please follow these instructions.

For **Internet Explorer**:

- Right-click on the following link: [Download Barcode Font](#)
- From the menu, select "Save Target As."
- Your browser will open a "Save As" dialog box.
- In the "Save As" dialog box, go to the Windows Fonts directory (normally c:\windows\fonts or c:\winnt\fonts), then select Save.
- The font will be saved as file name "3of9.ttf." The font name is "3 of 9 Barcode."

For **Netscape 7**:

Netscape 7 does not support the barcode font. NLM programmers have developed a work-around to display the font in Netscape. The response time to complete the download of receipted requests will be slower due to this issue in Netscape.

Depending on your operating system (O/S), you may need to perform an additional step to install the font. Please refer to your O/S documentation for further details.

To see if your font has been installed correctly, view the [Barcode Font Test](#) page."

Question: Now that I have LinkOut set up, what else do I do?

Answer

I assume that you have registered for LinkOut, edited your library's information, made your icons and uploaded them to your LinkOut profile, entered your electronic holdings in LinkOut, and registered for LinkOut to SERHOLD. If this assumption is correct, now you need to tell your users about all the wonderful work you have done. If your library has a website, either on the Internet or an intranet, you should put a link to PubMed using the special URL for your library's icons to display (<http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?holding=medlib> where 'medlib' is your library's LinkOut User Name). For those users that are off-site and do not connect via a proxy server (to mask their IP address from this off-site location with an on-site IP address), they will need to add your library's icon to their "My LinkOut Preferences" section of their Cubby profile.

Question: Why are requests routing to a library that is not in my routing table?

Answer

This has to do with the routing instructions that are indicated on each and every DOCLINE request. The three selections that route requests to libraries not in your library's routing table are: "Refer to Resource Libraries", "Route to NLM", and "Refer on after NLM". If "Refer to

Resource Libraries” is selected, the DOCLINE routing algorithm will only route a request to a library **IF**

- a. that institution reports holding either the volume or year of the title **AND**
- b. the selected delivery method is supported by that institution **AND**
- c. the institution did not previously reject the request (through Prefix LIBID and/or the routing table) **AND**
- d. the institution is an active DOCLINE participant when the request routes

If “Refer to NLM” is selected, the request will route to NLM. NLM’s holdings are not checked. NLM supports all delivery methods. If “Refer on after NLM” is selected, the DOCLINE routing algorithm will only route a request to a resource library **IF**

- a. that institution reports holding either the volume or year of the title **AND**
- b. the selected delivery method is supported by that institution **AND**
- c. the institution did not previously reject the request (through Prefix LIBID, routing table and/or the “Refer to Resource Libraries”) **AND**
- d. the institution is an active DOCLINE participant when the request routes

If the system does not find a total of 20 resource libraries and/or primary access libraries that report holding the title, then the system determines if the following four libraries report holding the title and either the volume or year: 1) American Hospital Association Library, 2) American Dental Association Library, 3) National Agricultural Library; and 4) Canada Institute for Scientific and Technical Information.

Question: DOCLINE won't let me look at certain requests. Why is this happening?

Answer

The answer depends on the originator of the request. The system allows borrowers access to their requests for 40 days. For lenders, the DOCLINE system allows access to only those requests that have routed to the lending library for the time the request is in the library’s queue. Once a lending library fills or rejects a request, they will be unable to access it.

Question: Is it possible to see Tugger outside of the DOCLINE system?

Answer

Yes, it is possible to see Tugger outside of the DOCLINE system by installing DOCLINE wallpaper. You can install the lovely DOCLINE Tugger wallpaper that comes in two styles by going to the following webpage, choosing a wallpaper, and clicking on the appropriate size for your screen resolution (The page informs you what your screen resolution is!): http://www.nlm.nih.gov/docline/docline_wallpaper.html. When the image is displayed in your browser’s window, right click on the image and select "Set as Wallpaper" or "Set as Background".

Andrea Lynch

[Please note: excerpts from the DOCLINE manual and FAQ have been incorporated into the answers above for consistency and clarification.]

This article is freely available at: <http://nnlm.gov/psr/lat/v13n2/faq@psrml.html>

A New Network Member in the Pacific Southwest Region

Since the November/December issue of *Latitudes*, one member has joined the National Network of Libraries of Medicine (NN/LM), Pacific Southwest Region. Please welcome the following new Full member of NN/LM!

| LIBID | Institution | Department | DOCLINE Active |
|--------------|--------------------|--------------------------------|-----------------------|
| CAUJNX | Corixa Corporation | Library & Information Services | Yes |

How You Can Help

If you know of a library or resource center that is not part of the Network and qualifies for either Affiliate or Full membership, please let us know or refer them to us. For more information, visit the following webpage on Network membership within the Pacific Southwest Region:

<http://www.nnlm.gov/psr/nm.html>.

Andrea Lynch

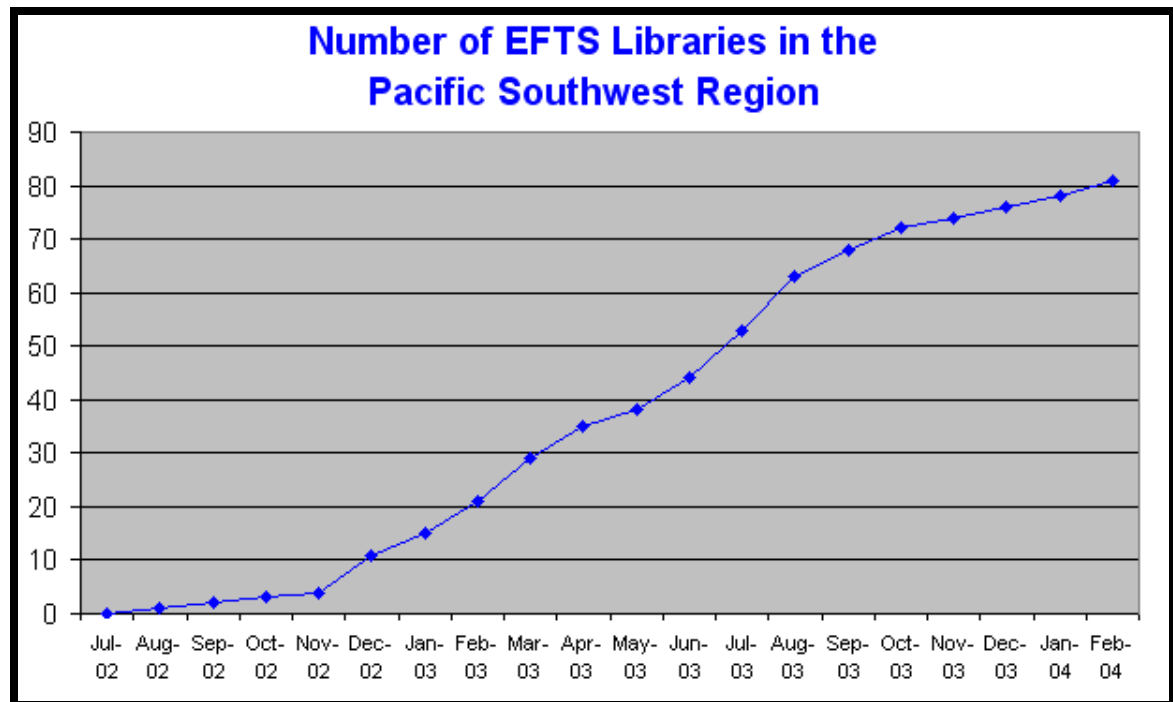
This article is freely available at: http://nnlm.gov/psr/lat/v13n2/new_members.html

New EFTS Participants in the Pacific Southwest Region We are up to 20%!

Since the last issue of *Latitudes*, the following 5 libraries have joined the Electronic Funds Transfer System (EFTS). As of March 1, 2004, 81 of our 411 DOCLINE libraries are EFTS participants in the Pacific Southwest Region. Will you be our next new EFTS participant?

Primary Access Libraries

Banner Thunderbird Medical Center, Glendale, AZ
California Pacific Medical Center (Davies Campus), San Francisco, CA
California Pacific Medical Center (Pacific Campus), San Francisco, CA
St. Mary's Medical Center, Long Beach, CA



To see all EFTS participants, search DOCLINE or visit the following webpage:
<https://efts.uchc.edu/efts/common/MembersDirectory.aspx>. For participants in the Pacific Southwest Region, select "07 Pacific Southwest Region" for the NN/LM Region pull-down menu and click on the Search button.

For more information about EFTS, please visit the EFTS website:
<https://efts.uchc.edu/efts/Common/Index.html>. Please contact Julie or Andrea with any questions or concerns you may have regarding EFTS.

Julie Kwan and Andrea Lynch

This article is freely available at: <http://nnlm.gov/psr/lat/v13n2/efts.html>

**Highlights of the January – February 2004 issue
of the *NLM Technical Bulletin***

Health Services Research Filters for Searching PubMed – A Beta Test

The National Information Center on Health Services Research and Health Care Technology (NICHSR) has released a beta test version of PubMed search filters for health care quality and costs. These filters are similar in structure to PubMed's Clinical Queries filters except, of course, that they deal with issues relating to appropriateness, process, and outcomes assessment or costs and cost-effectiveness. Please see this article in the NLM Technical Bulletin for more information about this beta test. If you work with quality and cost issues, please help with this development by participating in the beta test!

PubMed

- Languages – Bosnian is a new language valid for MEDLINE indexing effective for 2004 publications. Three languages used in indexing OLDMEDLINE citations are now also included in PubMed. These are: Azerbaijani, Malayalam, and Vietnamese. Note: The language pull-down in PubMed Limits includes only English, French, German, Italian, Japanese, Russian, and Spanish. All of the over sixty languages may be searched in PubMed using the name of the language or the three character language code and the field qualifier [la] or the language field in PubMed Limits.
- You can now be added to a listserv to learn about additions to the NCBI bookshelf and learn about new titles such as *Neuroscience*, 2nd edition by Purvis et al. Click on Bookshelf on the PubMed home page.
- OLDMEDLINE now covers back through 1951.
- The emphasis labels in PubMed's Clinical Queries have been changed. 'Sensitivity' has been replaced by 'sensitive search (broad)'; 'specificity' has been replaced by 'specific search (narrow)'. Thank goodness for the added clarity.
- PubMed's subject subset strategies have been updated. These include: Bioethics, Cancer, Complementary Medicine, Space Life Sciences, Systematic Reviews, and Toxicology.

Training Manuals

- Updated PubMed, NLM Gateway, and *ClinicalTrials.gov* training manuals are now available.

PubMed Central

- New PubMed Central journals include: *Clinical and Molecular Allergy*, *Journal of Circadian Rhythms*, and *PLoS Biology*.
- *Molecular Biology of the Cell* is now available full-text back to 1992.

Gene Indexing

- Three new organisms are now indexed for LocusLink: chicken, pig, and *Xenopus tropicalis* (Western clawed frog). This brings the total number of organisms to 13.

ClinicalTrials.gov

- A map of study locations is now included in search results.

ToxTown

- There are eight new entries to ToxTown: nitrogen oxides, particulate matter, sulfur dioxide, pesticides, phthalates, volatile organic compounds, benzene, and chromium.

This article is freely available at: <http://nnlm.gov/psr/lat/v13n2/highlights.html>

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Technical Notes: - e1

Bosnian—New Language for MEDLINE® Citations

PubMed® Adds Three New Language Abbreviations and Changes Two Abbreviations Already in Use

January 2004 PubMed®, NLM Gateway, and *ClinicalTrials.gov* Training Manuals Now Available

Three Additional Journals Participating in PubMed Central™

Additional Digitized Back Issues Available in PubMed Central™

New E-mail List Alerts Readers to Bookshelf Updates

"Map of locations" Feature Added to *ClinicalTrials.gov*

New Book Added to NCBI Bookshelf

Three More Organisms Added for Gene Indexing

Eight Entries Added to ToxTown

OLDMEDLINE Moves Back in Time

Changes for PubMed's® Clinical Queries

PubMed® Subject Subset Strategies Updated

This article is freely available at: <http://nnlm.gov/psr/lat/v13n2/TOCtechbull.html>

Upcoming Events

| March 2004 | |
|---------------|--|
| 10 (11am PST) | MLA Satellite Teleconference, <i>Roles and Essential Skills for the Expert Searcher</i> , http://www.mlanet.org/education/telecon/expertsearch/ad.html |
| 21 – 25 | Association of periOperative Registered Nurses, http://www.aorn.org , San Diego, CA (<i>PSRML Exhibit</i> , 3/23-3/25/2004) |
| April 2004 | |
| 2 | Meeting of the Hawaii-Pacific Chapter of the Medical Library Association, http://www.hml.org/hpcmla/homepage.html , Honolulu, HI |
| 15 | Medical Library Group of Southern California and Arizona Spring Program Meeting, Riverside, CA |
| 18 – 24 | National Library Week, http://www.ala.org/Content/NavigationMenu/Our_Association/Offices/Public_Information/Factsheets/National_Library_Week.htm |
| 19 | Medical Library Group of Southern California and Arizona Spring Program Meeting, Tucson, AZ |
| 22 – 24 | Nurses Organization of Veterans Affairs, http://www.vanurse.org , Tucson, AZ (<i>PSRML Exhibit</i> , 4/22/2004) |
| 26 | NTCC, <i>PubMed</i> (1-day), http://nnlm.gov/mar/online/description.html , San Francisco, CA |
| 27 | NTCC, <i>PubMed</i> (1-day), http://nnlm.gov/mar/online/description.html , San Francisco, CA |
| 28 | NTCC, <i>NLM Gateway & ClinicalTrails.gov</i> (1/2-day), http://nnlm.gov/mar/online/description.html , San Francisco, CA |
| May 2004 | |
| 8 – 13 | Annual Meeting of the American Urological Association, http://www.aaa2004.org/ , San Francisco, CA (<i>PSRML Exhibit</i> , 5/9-5/12/2004) |
| 21 – 26 | Annual Meeting of the Medical Library Association, http://www.mlanet.org/am/am2004/index.html , Washington, DC |
| June 2004 | |
| 5 – 10 | 2004 Annual Conference of the Special Library Association, Nashville, TN |
| 7 – 11 | Joint Conference on Digital Libraries (JCDL) 2004, <i>Global Reach and Diverse Impact</i> , http://www.jcdl2004.org/ , Tucson, AZ |
| 24 – 30 | 2004 Annual Conference of the American Library Association, http://www.ala.org/Content/ContentGroups/Events_and_Conferences2/Annual/AN2004/home.htm , Orlando, FL |
| July 2004 | |
| 26 | NTCC, <i>PubMed</i> (1-day), http://nnlm.gov/mar/online/description.html , Los Angeles, CA |
| 27 | NTCC, <i>PubMed</i> (1-day), http://nnlm.gov/mar/online/description.html , Los Angeles, CA |
| 28 | NTCC, <i>NLM Gateway & ClinicalTrails.gov</i> (1/2-day), http://nnlm.gov/mar/online/description.html , Los Angeles, CA |

This article is freely available at: <http://nnlm.gov/psr/lat/v13n2/upcoming.html>

Publication Information

Latitudes, the newsletter of the Pacific Southwest Region, National Network of Libraries of Medicine (NN/LM) is published bi-monthly and electronically for the Pacific Southwest Region of NN/LM by the Pacific Southwest Regional Medical Library. It is located at <http://nnlm.gov/psr/lat/>. The ISSN for *Latitudes* is 1544-743X.

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Network members may subscribe to the Regional email discussion list by visiting the following webpage: <http://www.nlm.gov/psr/lserv/rg7/>. If you do not want to subscribe to the Regional email discussion list, but would like to receive *Latitudes* go to <http://www.nlm.gov/psr/lserv/lat/>.

Please send items and contributed articles for *Latitudes* to Julie Kwan, Editor, at jkkwan@library.ucla.edu.

Pacific Southwest Regional Medical Library (PSRML) serves as headquarters for the Pacific Southwest Region of the National Network of Libraries of Medicine.

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